

ARKANSAS INSURANCE DEPARTMENT | FUNERAL SERVICES DIVISION - BURIAL ASSOCIATIONS

SEMI-ANNUAL REPORT (S.A.R.): **BENEFITS "RENDERED"**

Period Ending:



Mark with "X"

"Old" Business:

"New" Business:
(Act 443 of 1987)

Burial Association Name:

Contract Funeral Home Name:

AMOUNT TO BE REPORTED UNDER THE RECAP REPORT, SECTION 6. BENEFITS RECAP, [6c] ▶

AMOUNT PAYABLE TOTAL: -

NO.	B.A. MEMBER NAME	AGE	DATE OF DEATH	B.A. CERTIFICATE NUMBER	CERTIFICATE DATE	PLACE OF DEATH (CITY/STATE)	CERTIFICATE FACE AMOUNT	AMOUNT PAYABLE
1								
2								
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42								
43								
44								
45								
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83								
84								
85								
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NOTES:

The **BENEFITS "RENDERED" Exhibit** is required to report any B.A. members (also referred to as "policyholders") who have died, where B.A. certificate proceeds are payable to the servicing funeral home that provided funeral goods and/or services at the time of need. If the member certificate listed an individual as the "policy beneficiary", this DOES NOT provide for any cash payments to the named "beneficiary."

